

# FEC FORM 2

## STATEMENT OF CANDIDACY

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

16 NOV -2 AM 11:01

1. (a) Name of Candidate (in full) Blunt, Roy, , Sen.,			2. Candidate's FEC Identification Number S0M000183	
(b) Address (number and street) 209 Pennsylvania Ave. SE		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Washington DC 20003-1107		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate MO 00		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).  
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Friends of Roy Blunt		
(b) Address (number and street) PO Box 10178		
(c) City, State, and ZIP Code Columbia MO 65205-4002		

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Ayotte Blunt Moran Wolf Victory Committee		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State, and ZIP Code Alexandria VA 22314-5404		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Blunt, Roy, , Sen.,	Date 10/24/2016
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 2 / 4

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Keep The Senate Majority

(b) Address (number and street)

PO Box 1290

(c) City, State and ZIP Code

Dripping Springs

TX

78620-1290

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

MOKAN Victory Fund

(b) Address (number and street)

4741 Central Street

Suite 444

(c) City, State and ZIP Code

Kansas City

MO

64112-1533

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

2016 Senators Classic Committee

(b) Address (number and street)

228 S. Washington Street

Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

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# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 3 / 4

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Blunt Victory Committee

(b) Address (number and street)

228 S. Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Target Races Committee

(b) Address (number and street)

228 S. Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Blunt Toomey Joint Committee

(b) Address (number and street)

228 S. Washington St. 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

201611020200655329

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 4 / 4

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

United for a Senate Majority

(b) Address (number and street)

3595 RR 620 S  
Suite 200

(c) City, State and ZIP Code

Austin

TX

78738-6803

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

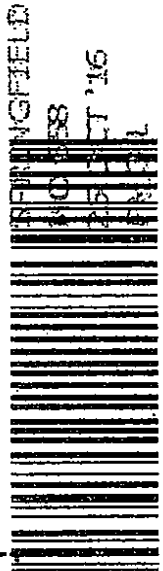
(b) Address (number and street)

(c) City, State and ZIP Code

201611020200055330

Friend 387421178693335555

PO Box 10178  
Columbia, MO 65205



7015 3430 0000 0235 7224

Office of Public Records

PO Box 77578

Washington, DC 20013

N<sup>o</sup> 10-21

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# United States Senate

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AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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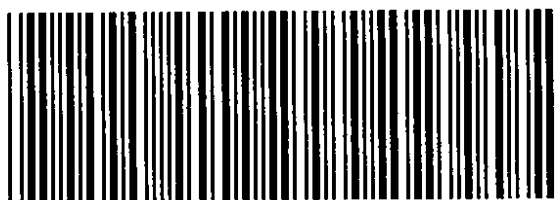
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